



**CELSIUS (°C) TEMPERATURE LOG**  
NORTH DAKOTA DEPARTMENT OF HEALTH  
HIV/AIDS PROGRAM  
SFN 59092 (05/2017)

Agency Name:

Month and Year:

REFRIGERATOR 2° to 8° C																
Day of Month	Time	Staff Initials		≥-1	0	1	2	3	4	5	6	7	8	9	10	≤11
1			am													
			pm													
2			am													
			pm													
3			am													
			pm													
4			am													
			pm													
5			am													
			pm													
6			am													
			pm													
7			am													
			pm													
8			am													
			pm													
9			am													
			pm													
10			am													
			pm													
11			am													
			pm													
12			am													
			pm													
13			am													
			pm													
14			am													
			pm													
15			am													
			pm													
16			am													
			pm													
17			am													
			pm													
18			am													
			pm													
19			am													
			pm													
20			am													
			pm													
21			am													
			pm													
22			am													
			pm													
23			am													
			pm													
24			am													
			pm													
25			am													
			pm													
26			am													
			pm													
27			am													
			pm													
28			am													
			pm													
29			am													
			pm													
30			am													
			pm													
31			am													
			pm													

Instructions: Place an "X" in the box that corresponds with the temperature (columns), day of the month, and am or pm (rows) for your temperature check. Then enter your initials and the time you monitored the temperature in the appropriate boxes. **If the temperature is in the gray range:** Store controls under proper condition as quickly as possible, call the manufacture to determine whether the potency of controls has been affected, and call the HIV Prevention Coordinator at 1-800-472-2180. Document action on the back of this form.